



STATE OF WASHINGTON  
WASHINGTON STATE BOARD OF HEALTH  
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January 8, 2003

**To:** State Board of Health Members  
**From:** Don Sloma, Executive Director  
**Re:** **PUBLIC HEALTH IMPROVEMENT PARTNERSHIP**

**Background and Summary**

The Public Health Improvement Plan (PHIP) is required by a legislative mandate contained in RCW 43.70.520. That law requires the state Department of Health (DOH), in consultation with a wide range of groups (including the state Board of Health, local health jurisdictions, area Indian health services and others) to produce a biennial "public health services improvement plan" with certain specified elements. (Please see statute attached.) The plans have been produced biennially since 1994.

An initial PHIP Steering Committee comprised of a wide range of state and local government agencies, community groups, tribal representatives and more has given way in recent years to a Public Health Improvement Partnership comprised of the state Board of Health, the state Department of Health (DOH), the Washington State Association of Local Public Health Officials (WSALPHO) and the University of Washington School of Public Health and Community Medicine (UW).

In 1994 and again in 1995, the Legislature expanded the requirements of the public health improvement plan by requiring DOH to include in it various plans, goals and standards for data collection and analysis, youth risk behavior reduction, immunizations, expanded public health capacity and more. These later enactments also authorized DOH to distribute any state "capacity improvement funds" that might be appropriated to local health jurisdictions, and required biennial assessments of the public health system's movement toward improvement objectives. (Please see RCW 43.70.525, RCW 43.70.550, RCW 43.70.555, RCW 43.70.570, RCW 43.70.575 and RCW 43.70.580 attached.)

Governor Locke's proposed biennial state operating budget for the 2003-05 biennium suggests conditioning continued state funding of local health jurisdictions' so called "I 695 Backfill" on conformance with standards developed under the PHIP processes.

In recent years, the State Board of Health has included active participation in PHIP as one of its priority policy development foci. Accordingly, Board members and/or staff have participated actively in PHIP work groups on Communications, Workforce Development, Key Health

Indicators, and Standards in addition to leading PHIP efforts to advance the objective of promoting access to critical health services. In December, the Board approved its 2002 Status Report on Access to Critical Health Services, which was simultaneously presented for consideration by the PHIP Steering Committee.

Today, the Board will hear several briefings about the Public Health Improvement Partnership's progress during 2002.

First, Joan Brewster, DOH Director of Public Health Systems Planning and Development, will present a brief overview of the 2002 PHIP Report.

Next, Janice Taylor, DOH Workforce Development Consultant, and Jack Thompson, Director of the University of Washington's Northwest Center for Public Health Practice, will speak about PHIP Workforce Development efforts.

This will be followed by a presentation by Barbara Mauer, Principal in MCPP Consulting, of that independent firm's assessment of state and local health jurisdictions' status relative to the PHIP Standards.

Finally, Lois Speelman, DOH Acting Assistant Secretary of Financial Services, will present the work of the PHIP Finance Committee, including its efforts to estimate the cost of a fully functional public health system in our state as described by the PHIP standards. Producing such an estimate has been a requirement under the PHIP statute since 1994.

**Recommended Board Action:**

None.